

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	20200	2/2/99
O.I.P.E. CLASSIFIER	[Signature]	32	6/3
FORMALITY REVIEW	[Signature]	68971	6/10/99
	2000.	68971	7/30/99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
1	3/19/03
2	7/29/02
3	1/16/04
4	8/4/04
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If more than 150 claims or 10 actions  
staple additional sheet here

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